



Kansas Health Policy Authority (KHPA) Medical Programs
Program Assessment for State Fiscal Year 2010

Presented October 2010

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Yearly Totals

During the State Fiscal Year (SFY) of 2010 (July 1, 2009 through June 30, 2010), the Kansas Health Policy Authority (KHPA) Medical Programs paid nearly \$162 million (rebates not included) on approximately two million prescriptions for fee-for-service (FFS) members. This is over a \$13 million decrease in prescription expenditures from SFY 2009, when KHPA Medical Programs paid over \$175 million on prescription claims.

KHPA Medical Programs averaged 147,886 members per month in SFY 2010, an increase of over 5,000 from the average of 142,493 for SFY 2009. Member eligibility types include not only Title 19 (TXIX), but also Medically Needy,

MediKan, the AIDS Drug Assistance Program (ADAP), and Presumptive Eligibility. KHPA Medical Programs cover other eligibility types through its Managed Care choices; however, prescription drug expenditures on members enrolled in the Managed Care plans are part of the capitated rate paid to the two Managed Care Organizations (UniCare and Children's Mercy Family Health Partners) and are not included in this report.

Members vs. Users
Member: a beneficiary eligible for pharmacy services under KHPA Medical Programs, excluding Managed Care choices.
User: a member who received at least one prescription.

While KHPA Medical Programs averaged 147,886 members per month, the average user per month was much lower at 48,525 ("user" is defined as a member who received at least one prescription). The average number of users per month increased by over 1,000 from 47,414 in SFY 2009. By using the distinction between members and users, a better picture of what KHPA Medical Programs pays per user for drug expenditures is seen—a cost that is typically much higher than the per member cost.

For SFY 2010, KHPA Medical Programs paid an average per member per month cost of \$91.31 compared to \$102.44 in SFY 2009. The average cost per user per month in SFY 2010 was \$277.97, compared to \$307.73 in SFY 2009. The average cost per claim for SFY 2010 was \$77.30, nearly \$9 less than the average cost per claim in SFY 2009 of \$85.94.

Table 1.1 contains a yearly program summary.

Table 1.1: Yearly Program Summary

12 Month Assessment	
Period Covered:	07/01/09 - 06/30/10
Total Prescription Cost:	\$161,809,369
Number of Prescriptions:	2,093,279
Total Members:	274,249
Total Users:	118,942
Avg Members Per Month:	147,886
Avg Users Per Month:	48,525
Avg Cost Per Member Per Year:	\$590.01
Avg Cost Per User Per Year:	\$1,360
Avg Cost Per Member Per Month:	\$91.31
Avg Cost Per User Per Month:	\$277.97
Avg Cost Per Claim:	\$77.30

Monthly Totals

The total number of beneficiaries eligible for services for all KHPA Medical Programs (including the Managed Care Plans) increased from over 325,000 in July 2009 to over 334,000 in June 2010, an increase of approximately 9,000. The number of FFS beneficiaries decreased from over 150,000 in July 2009 to nearly 137,000 in June 2010, a decrease of approximately 13,000. While the number of FFS beneficiaries decreased over the year, the number of MCO eligible beneficiaries increased from nearly 169,000 in July 2009 to nearly 187,000 in June 2010, an increase of approximately 18,000.

Table 2.1 contains a monthly synopsis of claim expenditures along with the number of members, users, amount KHPA Medical Programs paid per member per month, per user per month, per claim per month, and average cost per claim. **Figure 2.1** is a graphical representation of total beneficiaries eligible for services, including MCO eligibility and FFS members; this shows the overall trend for KHPA Medical Programs enrollment.

The number of users increased slightly from SFY 2009 to SFY 2010, with several spikes throughout the year. The number of users peaked in October 2009 at nearly 52,000, followed by a steep decrease and then a leveling of the number of users per month.

The number of prescription claims increased slightly from SFY 2009 to SFY 2010. Monthly prescription costs remained nearly unchanged from July 2009 to June 2010; however, several spikes were experienced in the winter months. These spikes were also seen in SFY 2009—possibly due to the increased use of acute medications.

The cost per member per month increased from \$91.56 in July 2009 to \$101.24 in June 2010. This increase was due to the drop in members per month beginning in January 2010 while the claims cost remained nearly unchanged during the time period. The cost per user per month decreased slightly from \$294.36 in July 2009 to \$290.89 in June 2010. This was most likely due to the number of users remaining nearly unchanged while the total claims cost decreased. SFY 2009 began with a cost per user per month of \$316.45. This was a \$25.56 decrease in cost per user per month over the span of two years. The average cost per claim decreased from \$80.22 in July 2009 to \$78.23 in June 2010.

Figures 2.2-5 trends the monthly totals for SFY 2009 and SFY 2010, including number of users per month, number of prescriptions per month, monthly claims cost, cost per member per month, cost per user per month, and average cost per prescription per month.

With an increase in number of prescriptions and users and nearly steady claims cost, the decrease in cost per user per month for SFY 2010 may be attributed to three factors:

- Aggressive management of State Maximum Allowable Cost (SMAC)
 - SMAC is a limit on what KHPA Medical Programs will pay for a drug when there are multiple manufacturers available.
 - During SFY 2010 over 10,000 NDCs were placed on SMAC.
- TPL (Third Party Liability) Cost Avoidance implementation
 - TPL Cost Avoidance denies claims for beneficiaries who have primary insurance if payment or denial from the primary insurance is not indicated on the claim.
 - TPL Cost Avoidance was implemented in January 2009.
- Increase in the generic availability in many costly drug classes
 - Examples of these drug classes include anticonvulsants and proton-pump inhibitors.

Monthly Totals

Table 2.1: Monthly Program Summary for SFY 2010

	Members	Users	# Rx	Rx Claims Cost	Cost Per Member Per Month	Cost Per User Per Month	Average Cost/Claim
Jul-09	150,876	46,928	172,201	\$13,813,587	\$91.56	\$294.36	\$80.22
Aug-09	154,537	47,735	169,501	\$13,505,113	\$87.39	\$282.92	\$79.68
Sep-09	155,016	49,825	177,661	\$13,795,389	\$88.99	\$276.88	\$77.65
Oct-09	155,682	51,897	186,070	\$13,748,053	\$88.31	\$264.91	\$73.89
Nov-09	149,851	48,123	168,943	\$13,050,633	\$87.09	\$271.19	\$77.25
Dec-09	147,978	48,901	179,591	\$13,698,335	\$92.57	\$280.12	\$76.28
Jan-10	149,638	47,299	166,499	\$12,870,723	\$86.01	\$272.11	\$77.30
Feb-10	147,643	48,467	167,152	\$12,977,506	\$87.90	\$267.76	\$77.64
Mar-10	145,321	49,780	185,836	\$14,399,423	\$99.09	\$289.26	\$77.48
Apr-10	142,152	48,626	177,094	\$13,497,923	\$94.95	\$277.59	\$76.22
May-10	139,398	47,192	166,034	\$12,628,841	\$90.60	\$267.61	\$76.06
Jun-10	136,540	47,522	176,697	\$13,823,842	\$101.24	\$290.89	\$78.23

Figure 2.1: Eligibility Per Month SFY 2009—SFY 2010

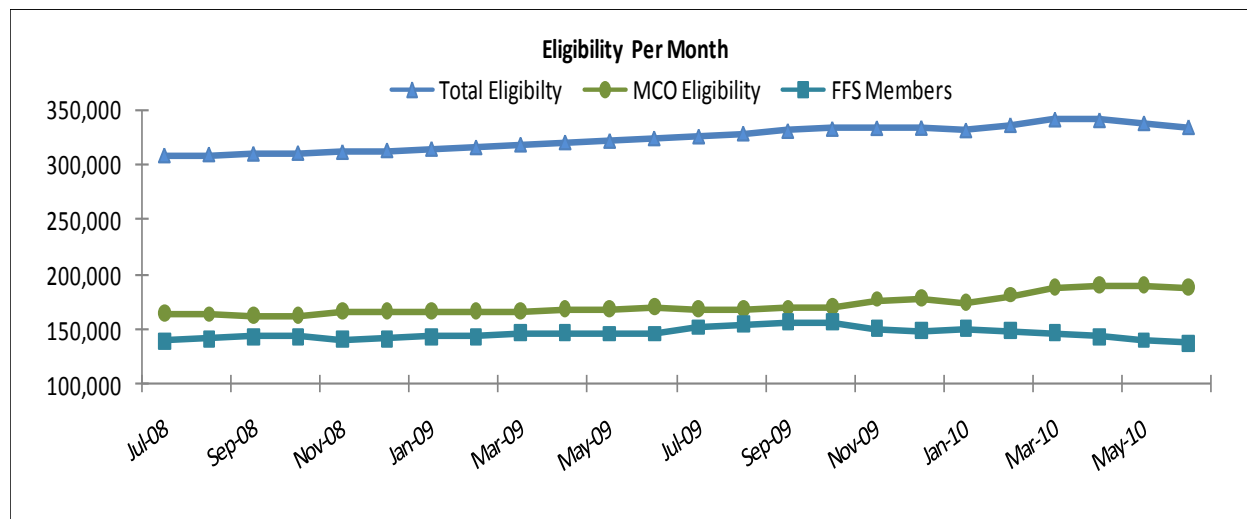
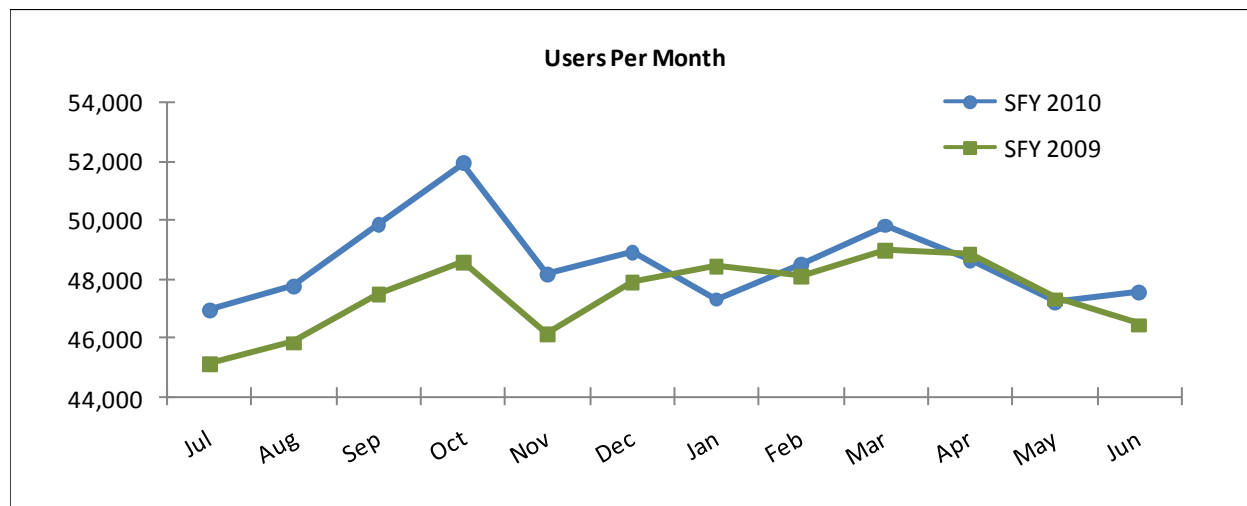


Figure 2.2: Users Per Month SFY 2009 vs. SFY 2010



Monthly Totals

Figure 2.3: Number of Prescriptions Per Month SFY 2009 vs. SFY 2010

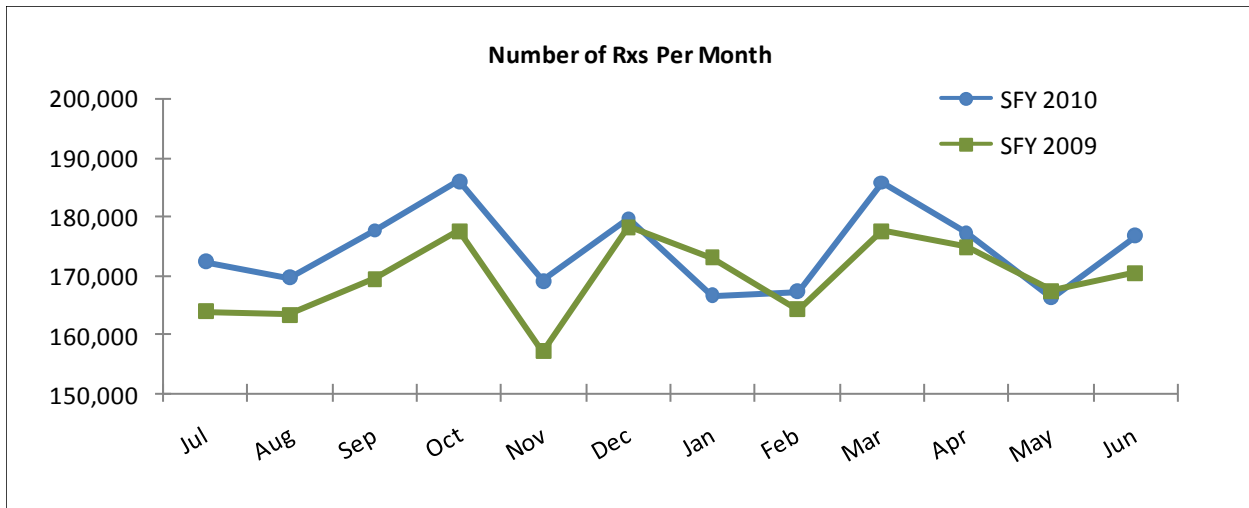


Figure 2.4: Claims Cost Per Month SFY 2009 vs. SFY 2010

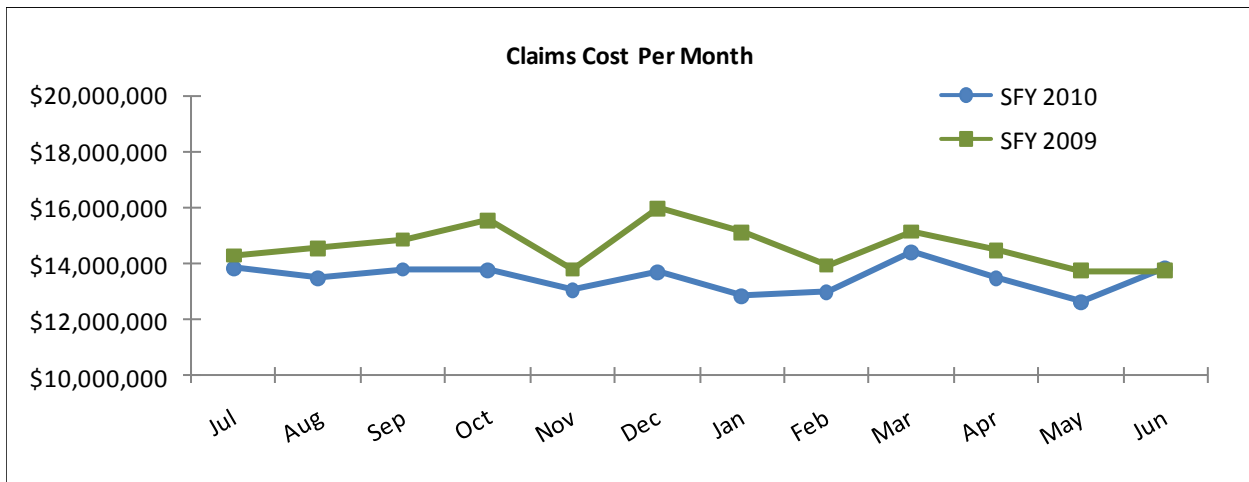
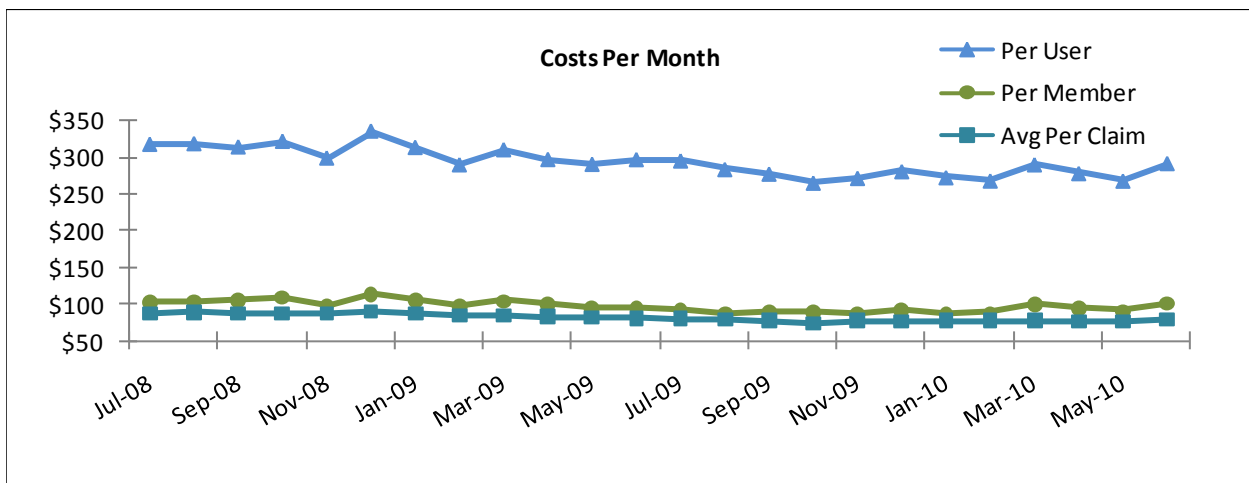


Figure 2.5: Costs Per Month SFY 2009—SFY 2010



Drug Classification Reporting

It is important to not only report drug expenditures according to beneficiary lives, claim numbers, paid amounts, and so forth, but to also review the drug expenditures by varying degrees of drug classifications, from therapeutic class to generic ingredient level to drug level.

Reporting the drug classifications by total claims cost and total number of claims shows where the largest drug expenditures are for KHPA Medical Programs, as well as identify the most commonly prescribed medications. This helps determine where there is potential for cost savings or clinically significant interventions.

Therapeutic Classes

The therapeutic classes are reported by the top 25 classes based on total number of claims, along with the top 25 classes based on the total claims cost. Therapeutic class reporting is based on American Hospital Formulary Service (AHFS) Pharmacologic-Therapeutic Classification third hierarchy level. An example for the AHFS classification of Central Nervous System Agents is shown below. Reporting is done at the third hierarchy level (antipsychotics in the table below) which contains several subclasses including atypical antipsychotics, butyrophenones, phenothiazines, thioxanthenes, and miscellaneous agents.

Reporting the top therapeutic classes based on both number of claims as well as the total claims cost shows where therapeutic classes overlap, and which classes would be lost if only one reporting method was used. Examples of drug classes that would potentially be lost if only reported by total number of claims are hemostatics and antiretrovirals. Both represent a high expenditure for KHPA Medical Programs though they represent a small percentage of total claims. This is due to the high cost of these agents. One example is Alphanate®, a hemostatic agent, which in SFY 2010 cost anywhere from \$400 to \$125,000 per claim depending on a member's specific needs.

The top ten largest percent changes from SFY 2009 to SFY 2010 by total claims and total claims cost are also reported. This shows drug classes that had a significant change from the previous year.

The top therapeutic classes by total number of claims remained nearly unchanged from SFY 2009. One of the main differences was the amphetamines, which had the most significant change in total claims from SFY 2009—34,999 to 37,814 in SFY 2010. Amphetamines are considered a mental health drug class which, by statute, are exempt from management.

AHFS Pharmacologic-Therapeutic Classification Hierarchy Example
28:00 Central Nervous System Agents
28:16 Psychotherapeutic Agents
28:16.08 Antipsychotics*
28:16.08.04 Atypical Antipsychotics

*Therapeutic Classes are reported at this level.

Table 3.1 contains the top 25 therapeutic classes based on the total number of claims. See **Appendix A** for a list of drugs included in each therapeutic class. **Figure 3.1** shows the most significant percentage changes of the total claims from SFY 2009 to SFY 2010.

The top therapeutic classes by total claims cost also remained nearly unchanged from SFY 2009. One of the main differences in total claims cost from last year was a decrease of \$8 million in spending on anticonvulsants from over \$14 million in SFY 2009 to around \$6 million in SFY 2010. During SFY 2010, several anticonvulsants that were previously only available as brand name became available as generics. Miscellaneous central nervous system agents had the largest percent increase in total claims cost from \$1.9 million in SFY 2009 to nearly \$2.7 million in SFY 2010. This class includes drugs like Strattera® (atomoxetine) and Intuniv® (guanfacine extended-release). Intuniv® was approved in the fall of 2009, and the average cost per claim is \$128.

Table 3.2 reports the top 25 therapeutic classes based on the total claims cost. **Figure 3.2** shows the most significant percentage changes of total claims cost from SFY 2009 to SFY 2010.

Therapeutic Class Reporting

Table 3.1: Top 25 Therapeutic Classes By Total Claims

AHFS Therapeutic Class	Total Claims	Total Users	Total Claims Cost	Avg Cost/ Claim	% Total Claims
Antidepressants	155,994	22,105	\$6,969,686	\$44.68	7.45%
Opiate Agonists	142,175	25,435	\$6,410,203	\$45.09	6.79%
Antipsychotic Agents	135,774	14,686	\$41,217,592	\$303.57	6.49%
Anticonvulsants, Misc	109,689	12,469	\$6,140,959	\$55.99	5.24%
Benzodiazepines (Anxiolytic, Sedatives & Hypnotics)	100,279	16,995	\$1,139,188	\$11.36	4.79%
2 nd Generation Antihistamines	70,142	16,214	\$608,050	\$8.67	3.35%
Non-Steroidal Anti-Inflammatory Agents	67,323	17,910	\$1,025,488	\$15.23	3.22%
Beta-Adrenergic Agonists	67,261	18,700	\$5,274,615	\$78.42	3.21%
Proton-Pump Inhibitors	53,446	9,931	\$5,123,958	\$95.87	2.55%
Benzodiazepines (Anticonvulsants)	45,861	6,415	\$241,351	\$5.26	2.19%
Beta-Adrenergic Blocking Agents	39,042	6,453	\$455,940	\$11.68	1.87%
HMG-CoA Reductase Inhibitors	39,016	5,925	\$2,175,897	\$55.77	1.86%
Anorexicogenic, Respiratory and Cerebral Stimulants, Misc	38,703	5,841	\$4,812,019	\$124.33	1.85%
Angiotensin-Converting Enzyme Inhibitors	38,606	6,636	\$163,171	\$4.23	1.84%
Amphetamines	37,814	5,995	\$4,212,258	\$111.39	1.81%
Penicillins	35,025	24,320	\$483,294	\$13.80	1.67%
Adrenals	33,193	14,490	\$2,102,172	\$63.33	1.59%
Central Alpha-Agonists	30,396	4,976	\$398,757	\$13.12	1.45%
Anxiolytics, Sedatives & Hypnotics, Misc	30,200	6,882	\$1,046,256	\$34.64	1.44%
Thyroid Agents	29,165	3,942	\$165,792	\$5.68	1.39%
Insulins	27,439	2,931	\$4,323,502	\$157.57	1.31%
Macrolides	25,488	17,792	\$428,764	\$16.82	1.22%
Leukotriene Modifiers	25,379	6,279	\$2,754,630	\$108.54	1.21%
Centrally Acting Skeletal Muscle Relaxants	22,380	5,995	\$227,438	\$10.16	1.07%
Biguanides	21,317	3,691	\$104,689	\$4.91	1.02%
Totals	1,421,107	283,008	\$98,005,669	\$68.96	67.89%

Therapeutic Class Reporting

Table 3.2: Top 25 Therapeutic Classes By Total Claims Cost

AHFS Therapeutic Class	Total Claims	Total Users	Total Claims Cost	Avg Cost/Claim	% Total Claims Cost
Antipsychotic Agents	135,774	14,686	\$41,217,592	\$303.57	25.47%
Antiretrovirals	15,086	971	\$10,836,048	\$718.29	6.70%
Hemostatics	435	42	\$10,410,657	\$23,932.55	6.43%
Antidepressants	155,994	22,105	\$6,969,686	\$44.68	4.31%
Opiate Agonists	142,175	25,435	\$6,410,203	\$45.09	3.96%
Anticonvulsants, Misc	109,689	12,469	\$6,140,959	\$55.99	3.80%
Beta-Adrenergic Agonists	67,261	18,700	\$5,274,615	\$78.42	3.26%
Proton-Pump Inhibitors	53,446	9,931	\$5,123,958	\$95.87	3.17%
Anorexic, Respiratory & Cerebral Stimulants, Misc	38,703	5,841	\$4,812,019	\$124.33	2.97%
Insulins	27,439	2,931	\$4,323,502	\$157.57	2.67%
Amphetamines	37,814	5,995	\$4,212,258	\$111.39	2.60%
Leukotriene Modifiers	25,379	6,279	\$2,754,630	\$108.54	1.70%
Central Nervous System Agents, Misc	18,092	3,344	\$2,679,107	\$148.08	1.66%
HMG-CoA Reductase Inhibitors	39,016	5,925	\$2,175,897	\$55.77	1.34%
Adrenals	33,193	14,490	\$2,102,172	\$63.33	1.30%
Antineoplastic Agents	4,847	959	\$1,989,627	\$410.49	1.23%
Pituitary	5,323	851	\$1,625,542	\$305.38	1.00%
Thiazolidinediones	7,060	1,017	\$1,345,975	\$190.65	0.83%
Biologic Response Modifiers	414	72	\$1,208,456	\$2,918.97	0.75%
Platelet-Aggregation Inhibitors	8,218	1,252	\$1,164,535	\$141.71	0.72%
Benzodiazepines (Anxiolytic, Sedatives, & Hypnotics)	100,279	16,995	\$1,139,188	\$11.36	0.70%
Angiotensin II Receptor Antagonists	13,446	1,904	\$1,093,433	\$81.32	0.68%
Anticoagulants	10,494	1,483	\$1,073,205	\$102.27	0.66%
Enzymes	447	92	\$1,061,336	\$2,374.35	0.66%
Monoclonal Antibodies	710	166	\$1,059,225	\$1,491.87	0.65%
Totals	1,050,734	173,935	\$128,203,825	\$122.01	79.23%

Therapeutic Class Reporting

Figure 3.1: Significant Percent Changes of Total Claims from SFY 2009 to SFY 2010

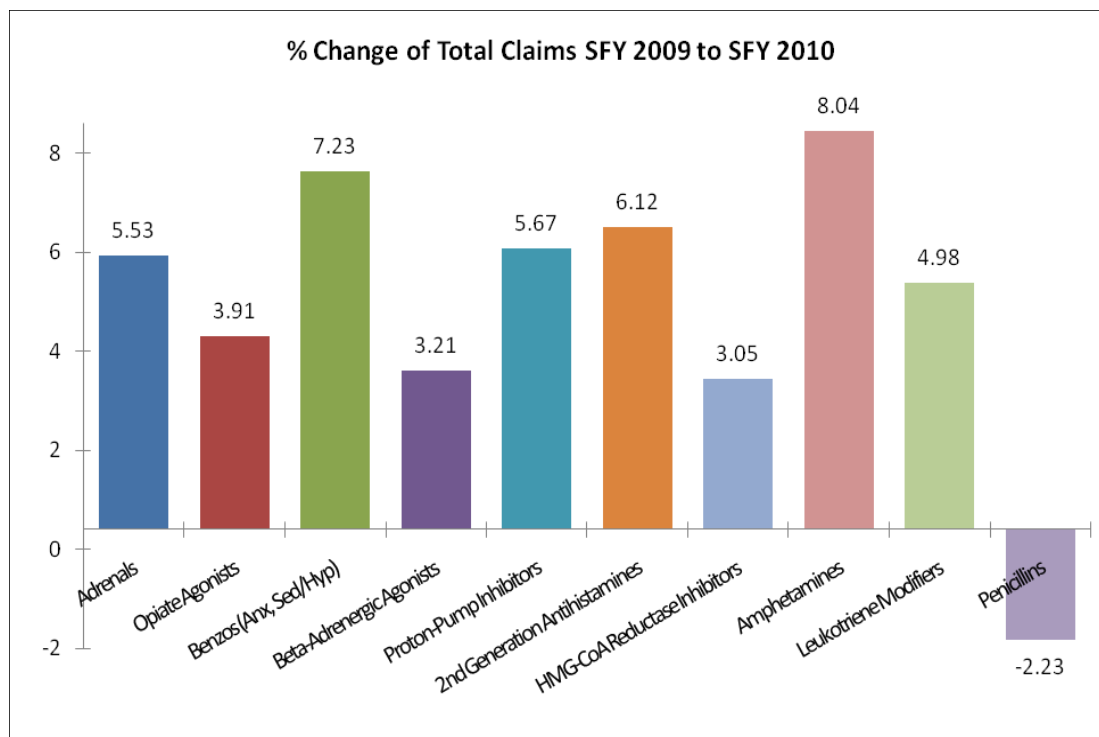
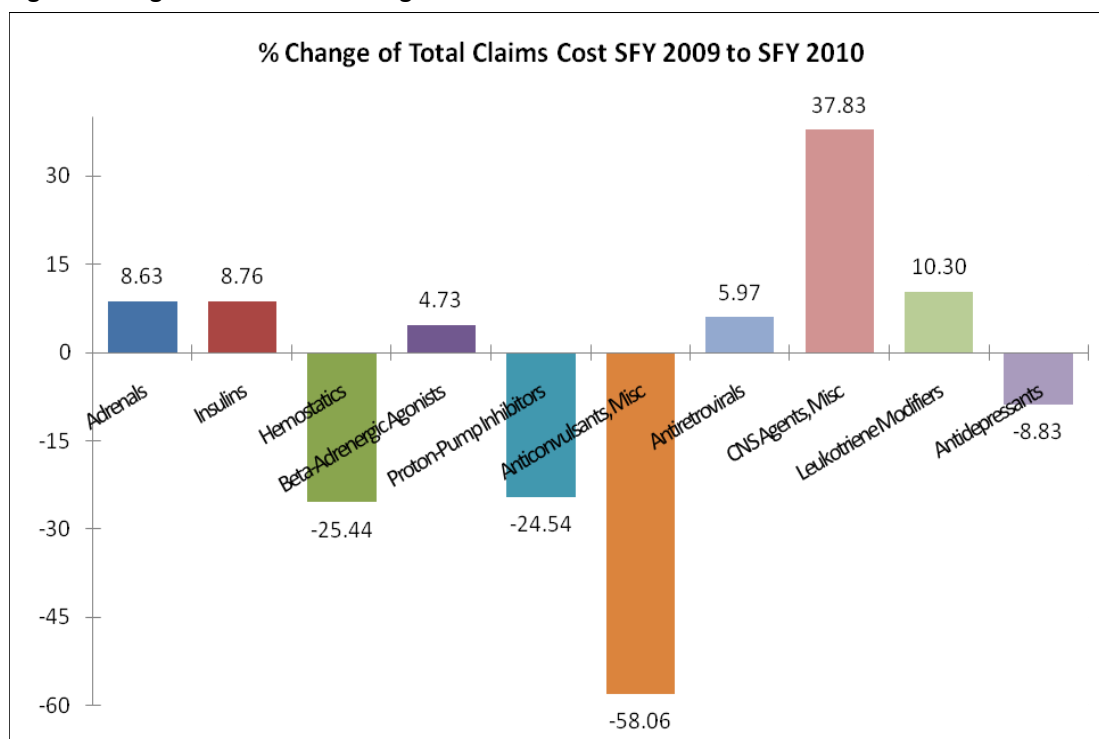


Figure 3.2: Significant Percent Changes of Total Cost of Claims from SFY 2009 to SFY 2010



Trend Summary Analysis

Of note, within the top 25 therapeutic classes by total claims cost and total number of claims there are three drug classes that appear in the top five in both measures: antipsychotics, opiate agonists, and antidepressants. In past years, anticonvulsants have also appeared in the top five for both expenditures and claims, but due to new generic availability this class is no longer in the top five for expenditures. In SFY 2009 antipsychotics, antidepressants, and anticonvulsants were reported. Opiate agonists appear in the top five by both reporting methods this year as they continue to be a large expenditure and represent a large number of claims.

From SFY 2009 to SFY 2010 the total claims for antipsychotics remained nearly unchanged while total claims cost increased slightly. The average cost per claim for antipsychotics remained steady around \$300.

Table 4.1 shows the quarterly percent change by number of users, number of prescriptions, total claims cost, and average cost per claim for antipsychotics. **Figure 4.1** show claims cost compared to the number of claims per quarter for antipsychotics.

From SFY 2009 to SFY 2010 total claims for antidepressants increased slightly while total claims cost decreased. This caused the average cost per claim to decrease from just over \$50 at the beginning of SFY 2009 to \$45 at the end of SFY 2010. The availability of several new generic formulations in the antidepressant class, including venlafaxine extended release (Effexor XR®), contributed to the decrease in cost.

Table 4.2 shows the quarterly percent change by number of users, number of prescriptions, total claims cost, and average cost per claim for antidepressants. **Figure 4.2** show claims cost compared to the number of claims per quarter for antidepressants.

Total users and claims for opiate agonists increased while total claims cost decreased slightly from SFY 2009 to SFY 2010. The average cost per claim decreased from around \$47 in SFY 2009 to \$45 in SFY 2010.

Table 4.3 shows the quarterly percent change by number of users, number of prescriptions, total claims cost, and average cost per claim for opiate agonists. **Figure 4.3** show claims cost compared to the number of claims per quarter for opiate agonists.

In the miscellaneous anticonvulsants class the total users and claims remained nearly unchanged from SFY 2009 to SFY 2010 while total claims cost decreased by 58% from \$14.6 million in SFY 2009 to \$6.1 million in SFY 2010. The average cost per claim for the anticonvulsants class also decreased from \$133 in SFY 2009 to \$56 in SFY 2010. The decrease in cost is due to the availability of several generic agents towards the end of SFY 2009 into SFY 2010, including generics for: Keppra® (levetiracetam), Depakote® (divalproex), and Topamax® (topiramate).

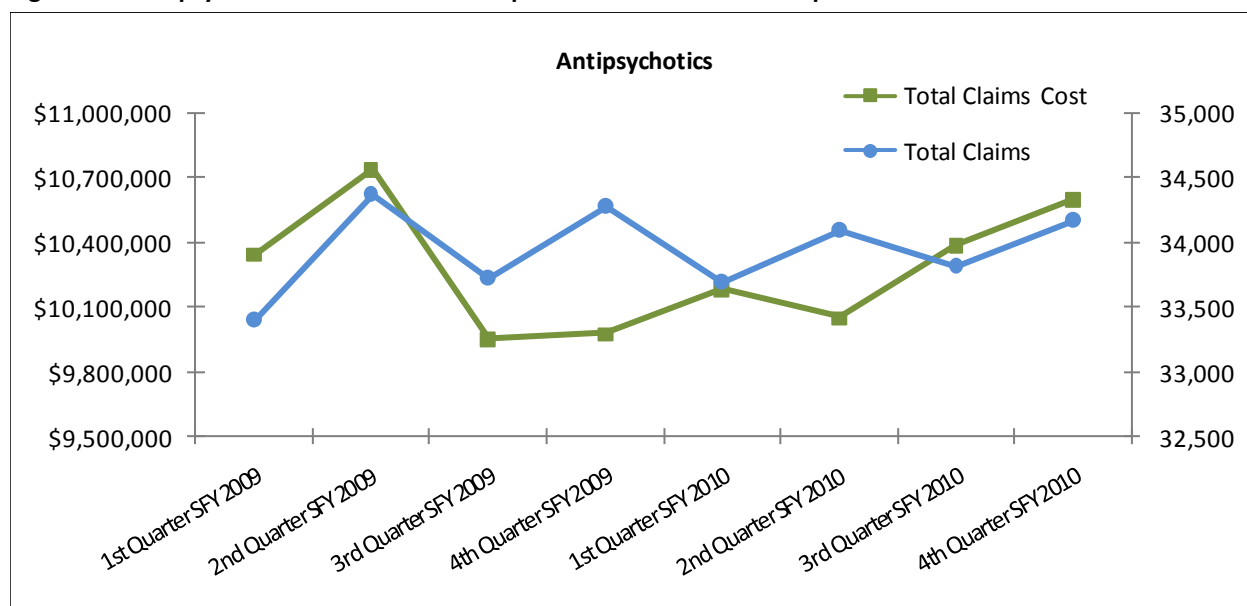
Table 4.4 shows the quarterly percent change by number of users, number of prescriptions, total claims cost, and average cost per claim for anticonvulsants. **Figure 4.4** shows claims cost compared to the number of claims per quarter for anticonvulsants.

Antipsychotics

Table 4.1: Antipsychotics Trend Summary Analysis

	Total Users	% Change	Total Claims	% Change	Total Claims Cost	% Change	Average Cost/Claim	% Change
1st Quarter SFY 2009	22,898	2.05	33,401	2.79	\$10,344,036	24.96	\$309.69	21.57
2nd Quarter SFY 2009	23,421	2.28	34,373	2.91	\$10,739,110	3.82	\$312.43	0.88
3rd Quarter SFY 2009	23,532	0.47	33,722	-1.89	\$9,950,889	-7.34	\$295.09	-5.55
4th Quarter SFY 2009	23,681	0.63	34,282	1.66	\$9,975,381	0.25	\$290.98	-1.39
Totals SFY 2009	93,532		135,778		\$41,009,416		\$302.03	
1st Quarter SFY 2010	23,305	-1.59	33,690	-1.73	\$10,182,836	2.08	\$302.25	3.87
2nd Quarter SFY 2010	23,555	1.07	34,097	1.21	\$10,049,883	-1.31	\$294.74	-2.48
3rd Quarter SFY 2010	23,572	0.07	33,813	-0.83	\$10,384,258	3.33	\$307.11	4.20
4th Quarter SFY 2010	23,650	0.33	34,174	1.07	\$10,600,615	2.08	\$310.20	1.01
Totals SFY 2010	94,082	0.59	135,774	0.00	\$41,217,592	0.51	\$303.57	0.51

Figure 4.1: Antipsychotics Cost of Claims Compared to Number of Prescriptions

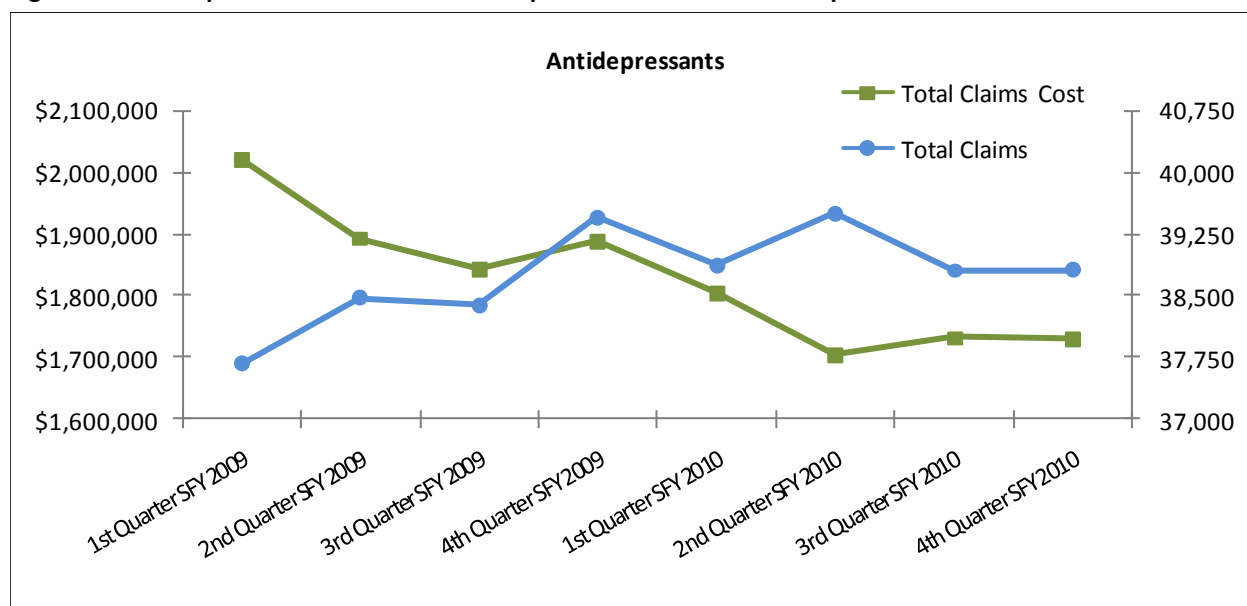


Antidepressants

Table 4.2: Antidepressants Trend Summary Analysis

	Total Users	% Change	Total Claims	% Change	Total Claims Cost	% Change	Average Cost/Claim	% Change
1st Quarter SFY 2009	28,472	2.40	37,661	2.58	\$2,021,330	-2.36	\$53.67	-4.81
2nd Quarter SFY 2009	28,957	1.70	38,472	2.15	\$1,892,852	-6.36	\$49.20	-8.33
3rd Quarter SFY 2009	29,228	0.94	38,380	-0.24	\$1,844,235	-2.57	\$48.05	-2.33
4th Quarter SFY 2009	29,766	1.84	39,456	2.80	\$1,887,522	2.35	\$47.84	-0.44
Totals SFY 2009	116,423		153,969		\$7,645,939		\$49.66	
1st Quarter SFY 2010	29,238	-74.89	38,866	-74.76	\$1,803,550	-76.41	\$46.40	-6.55
2nd Quarter SFY 2010	29,591	1.21	39,508	1.65	\$1,703,792	-5.53	\$43.13	-7.07
3rd Quarter SFY 2010	29,370	-0.75	38,805	-1.78	\$1,731,588	1.63	\$44.62	3.47
4th Quarter SFY 2010	29,222	-0.50	38,815	0.03	\$1,730,756	-0.05	\$44.59	-0.07
Totals SFY 2010	117,421	0.86	155,994	1.32	\$6,969,686	-8.84	\$44.68	-10.03

Figure 4.2: Antidepressants Cost of Claims Compared to Number of Prescriptions

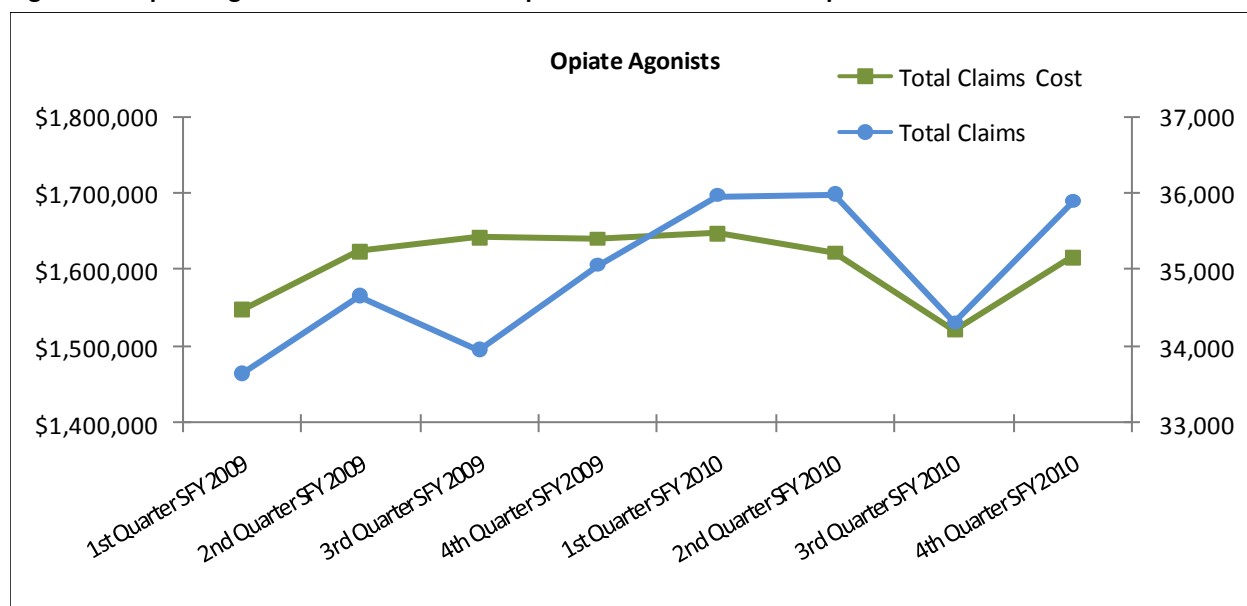


Opiate Agonists

Table 4.3: Opiate Agonists Trend Summary Analysis

	Total Users	% Change	Total Claims	% Change	Total Claims Cost	% Change	Average Cost/Claim	% Change
1st Quarter SFY 2009	20,040	4.04	33,635	4.17	\$1,548,148	7.62	\$46.03	3.32
2nd Quarter SFY 2009	20,346	1.53	34,664	3.06	\$1,624,545	4.93	\$46.87	1.82
3rd Quarter SFY 2009	20,496	0.74	33,950	-2.06	\$1,642,678	1.12	\$48.39	3.24
4th Quarter SFY 2009	21,088	2.89	35,059	3.27	\$1,641,775	-0.05	\$46.83	-3.22
Totals SFY 2009	81,970		137,308		\$6,457,146		\$47.00	
1st Quarter SFY 2010	21,549	2.19	35,978	2.62	\$1,649,130	0.45	\$45.84	-2.11
2nd Quarter SFY 2010	21,596	0.22	35,995	0.05	\$1,623,447	-1.56	\$45.10	-1.61
3rd Quarter SFY 2010	21,098	-2.31	34,306	-4.69	\$1,520,844	-6.32	\$44.33	-1.71
4th Quarter SFY 2010	21,846	3.55	35,896	4.63	\$1,616,781	6.31	\$45.04	1.60
Totals SFY 2010	86,089	5.03	142,175	3.54	\$6,410,202	-0.73	\$45.09	-4.06

Figure 4.3: Opiate Agonists Cost of Claims Compared to Number of Prescriptions

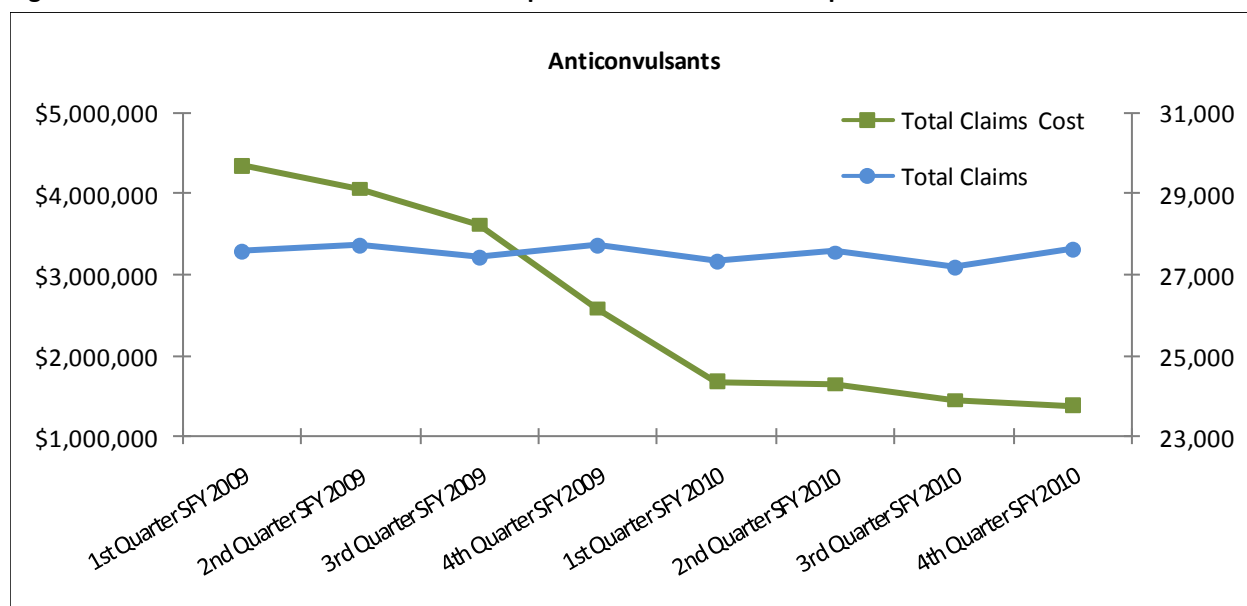


Anticonvulsants

Table 4.4: Anticonvulsants Trend Summary Analysis

	Total Users	% Change	Total Claims	% Change	Total Claims Cost	% Change	Average Cost/Claim	% Change
1st Quarter SFY 2009	19,386	1.10	27,583	1.42	\$4,362,366	-2.90	\$158.15	-4.26
2nd Quarter SFY 2009	19,486	0.52	27,733	0.54	\$4,075,522	-6.58	\$146.96	-7.08
3rd Quarter SFY 2009	19,509	0.12	27,419	-1.13	\$3,625,828	-11.03	\$132.24	-10.02
4th Quarter SFY 2009	19,512	0.02	27,717	1.09	\$2,580,778	-28.82	\$93.11	-29.59
Totals SFY 2009	77,893		110,452		\$14,644,494		\$132.59	
1st Quarter SFY 2010	19,114	-2.04	27,326	-1.41	\$1,678,078	-34.98	\$61.41	-34.05
2nd Quarter SFY 2010	19,238	0.65	27,558	0.85	\$1,640,287	-2.25	\$59.52	-3.07
3rd Quarter SFY 2010	19,140	-0.51	27,180	-1.37	\$1,445,195	-11.89	\$53.17	-10.67
4th Quarter SFY 2010	19,195	0.29	27,625	1.64	\$1,377,399	-4.69	\$49.86	-6.23
Totals SFY 2010	76,687	-1.55	109,689	-0.69	\$6,140,959	-58.07	\$55.99	-57.77

Figure 4.4: Anticonvulsants Cost of Claims Compared to Number of Prescriptions



Generic Ingredient Level Reporting

Generic ingredient level reporting includes all claims classified under a generic name. For example, risperidone includes all manufacturers and strengths of brand and generic Risperdal®, Risperdal Consta®, and risperidone.

This level is reported as the top 25 generic ingredients based on total number of claims and total claims cost. Reporting based on total number of claims shows the most commonly prescribed generic ingredients. Some of these agents represent a smaller expenditure for KHPA Medical Programs making them unique to this list, including several benzodiazepines, second generation antihistamines, and antibiotics. All of these agents are available in generic formulations, reducing the cost to KHPA Medical Programs.

The top 25 drugs by total claims cost shows which ingredients have a high cost. Included in this list are hemostatics, antiretrovirals, antipsychotics, antidepressants, and amphetamines. The majority of these agents are only available in a brand name formulation, which contributes to their high cost.

In SFY 2010 many of the top 25 generic ingredients by total number of claims are similar to SFY 2009. Cetirizine had the highest increase in percentage of total claims from last year, possibly due to the availability of a generic and preferred status on the Preferred Drug List (PDL). In SFY 2009 there were 16,838 claims compared to 20,867 claims in SFY 2010, an increase of 24%.

Hydrocodone/acetaminophen, clonazepam, and loratadine appear at the top based on the total number of claims again this year. These drugs are commonly prescribed, representing nearly 8% of total claims but less than 1% of total claims cost for SFY 2010.

Table 5.1 contains the top 25 generic ingredients by total number of claims. **Figure 5.1** shows the most significant percentage changes of total claims from SFY 2009 to SFY 2010.

The top 25 generic ingredients by total claims cost remained nearly unchanged from SFY 2009. Divalproex had the largest percent decrease in total claims cost from nearly \$3.3 million in SFY 2009 to just over \$1.7 million in SFY 2010, a decrease of nearly 47%. Lansoprazole also saw a large decrease in total claims cost from nearly \$6 million in SFY 2009 to just over \$4 million in SFY 2010, a decrease of nearly 30%. Both of these agents became generically available in SFY 2010.

Antipsychotic agents made up the majority of the top generic ingredients based on total claims cost, representing nearly 23% of total claims cost and less than 6% of total claims.

Table 5.2 contains the top 25 generic ingredients by total claims cost. **Figure 5.2** shows the most significant percentage of changes of total claims cost from SFY 2009 to SFY 2010.

Generic Ingredient Level Reporting

Table 5.1: Top 25 Generic Ingredients By Total Claims

Generic Name	AHFS Therapeutic Class	Total Claims	Total Users	Total Claims Cost	Avg Cost/Claim	% Total Claims
Hydrocodone/APAP	Opiate Agonists	66,122	16,335	\$694,484	\$10.50	3.16%
Clonazepam	Benzodiazepines (Anticonvulsants)	45,861	6,415	\$241,351	\$5.26	2.19%
Loratadine	2 nd Generation Antihistamines	45,207	9,606	\$225,252	\$4.98	2.16%
Albuterol	Beta-Adrenergic Agonists	43,040	16,191	\$1,396,790	\$32.45	2.06%
Alprazolam	Benzodiazepines (Anxiolytic, Sed/Hyp)	41,961	6,906	\$199,719	\$4.76	2.00%
Lansoprazole	Proton-Pump Inhibitors	35,190	5,853	\$4,162,914	\$118.30	1.68%
Lorazepam	Benzodiazepines (Anxiolytic, Sed/Hyp)	33,963	6,935	\$218,759	\$6.44	1.62%
Quetiapine	Antipsychotic Agents	33,110	4,667	\$10,508,894	\$317.39	1.58%
Risperidone	Antipsychotic Agents	29,608	4,333	\$1,456,583	\$49.20	1.41%
Levothyroxine	Thyroid Agents	28,728	3,891	\$158,468	\$5.52	1.37%
Aspirin	NSAIDs	26,956	3,692	\$99,746	\$3.70	1.29%
Methylphenidate	Anorex, Resp and Cereb Stim, Misc	26,853	4,242	\$3,001,910	\$111.79	1.28%
Aripiprazole	Antipsychotic Agents	26,450	4,467	\$12,982,710	\$490.84	1.26%
Lisinopril	ACE Inhibitors	26,196	4,634	\$96,384	\$3.68	1.25%
Divalproex	Anticonvulsants, Misc	25,857	3,238	\$1,752,068	\$67.76	1.24%
Montelukast	Leukotriene Modifiers	25,074	6,241	\$2,724,993	\$108.68	1.20%
Amoxicillin	Penicillins	24,318	18,512	\$148,900	\$6.12	1.16%
Sertraline	Antidepressants	23,297	4,299	\$157,178	\$6.75	1.11%
Azithromycin	Macrolides	23,220	16,776	\$387,259	\$16.68	1.11%
Trazodone	Antidepressants	22,652	4,778	\$136,785	\$6.04	1.08%
Clonidine	Central Alpha-Agonists	21,657	3,616	\$144,523	\$6.67	1.03%
Metformin	Biguanides	21,317	3,691	\$104,689	\$4.91	1.02%
Cetirizine	2 nd Generation Antihistamines	20,867	6,406	\$171,950	\$8.24	1.00%
Simvastatin	HMG-CoA Reductase Inhibitors	20,411	3,488	\$82,732	\$4.05	0.98%
Escitalopram	Antidepressants	19,739	3,676	\$1,871,169	\$94.80	0.94%
Totals		757,654	172,888	\$43,126,209	\$56.92	36.19%

Generic Ingredient Level Reporting

Table 5.2: Top 25 Generic Ingredients By Total Claims Cost

Generic Name	AHFS Therapeutic Class	Total Claims	Total Users	Total Claims Cost	Avg Cost/Claim	% Total Claims Cost
Aripiprazole	Antipsychotic Agents	26,450	4,467	\$12,982,710	\$490.84	8.02%
Quetiapine	Antipsychotic Agents	33,110	4,667	\$10,508,894	\$317.39	6.49%
AHF/vWF	Hemostatics	173	8	\$5,737,849	\$33,166.76	3.55%
Olanzapine	Antipsychotic Agents	9,661	1,423	\$5,491,650	\$568.43	3.39%
Ziprasidone	Antipsychotic Agents	12,364	1,801	\$4,344,567	\$351.39	2.68%
Lansoprazole	Proton-Pump Inhibitors	35,190	5,853	\$4,162,914	\$118.30	2.57%
Risperidone	Antipsychotic Agents	33,002	4,535	\$3,721,659	\$112.77	2.30%
Oxycodone	Opiate Agonists	14,276	2,116	\$3,294,212	\$230.75	2.04%
Factor VIII	Hemostatics	129	16	\$3,041,637	\$23,578.58	1.88%
Methylphenidate	Anorex, Resp and Cereb Stim, Misc	26,853	4,242	\$3,001,910	\$111.79	1.86%
Efavirenz/Emtricitabine/Tenofovir	Antiretrovirals	2,345	338	\$2,984,825	\$1,272.85	1.84%
Montelukast	Leukotriene Modifiers	25,074	6,241	\$2,724,993	\$108.68	1.68%
Paliperidone	Antipsychotic Agents	6,327	998	\$2,618,916	\$413.93	1.62%
Fluticasone/Salmeterol	Beta-Adrenergic Agonists	11,962	3,336	\$2,400,532	\$200.68	1.48%
Lisdexamfetamine	Amphetamines	18,946	3,330	\$2,221,604	\$117.26	1.37%
Emtricitabine/Tenofovir	Antiretrovirals	2,550	366	\$2,150,818	\$843.46	1.33%
Duloxetine	Antidepressants	11,513	1,897	\$1,958,537	\$170.12	1.21%
Escitalopram	Antidepressants	19,739	3,676	\$1,871,169	\$94.80	1.16%
Amphetamine Mixed Salts	Amphetamines	16,338	2,834	\$1,836,825	\$112.43	1.14%
Atomoxetine	CNS Agents, Misc	11,675	1,897	\$1,786,224	\$153.00	1.10%
Divalproex	Anticonvulsants, Misc	25,857	3,238	\$1,752,068	\$67.76	1.08%
Insulin Glargine	Insulins	11,334	1,986	\$1,731,790	\$152.80	1.07%
Atorvastatin	HMG-CoA Reductase Inhibitors	14,237	1,939	\$1,611,775	\$113.21	1.00%
Albuterol	Beta-Adrenergic Agonists	43,040	16,191	\$1,396,790	\$32.45	0.86%
Venlafaxine	Antidepressants	7,803	1,246	\$1,277,812	\$163.76	0.79%
Totals		419,948	78,641	\$86,612,682	\$206.25	53.53%

Generic Ingredient Level Reporting

Figure 5.1: Significant Percent Changes of Total Claims from SFY 2009 to SFY 2010

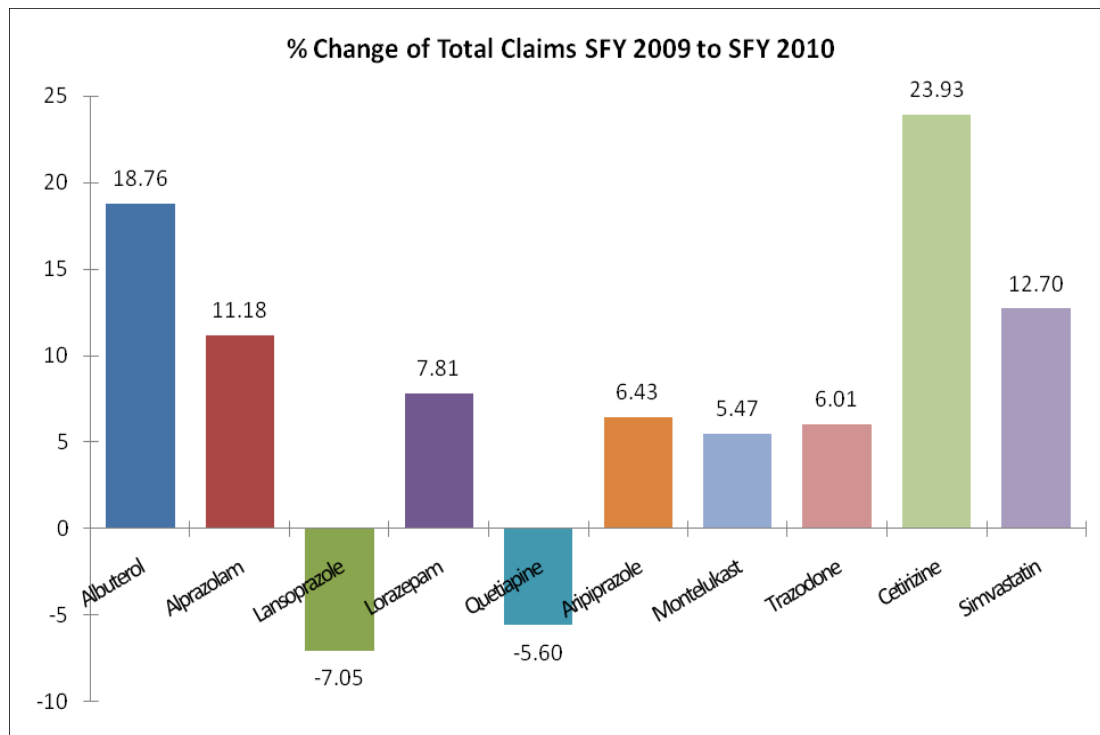
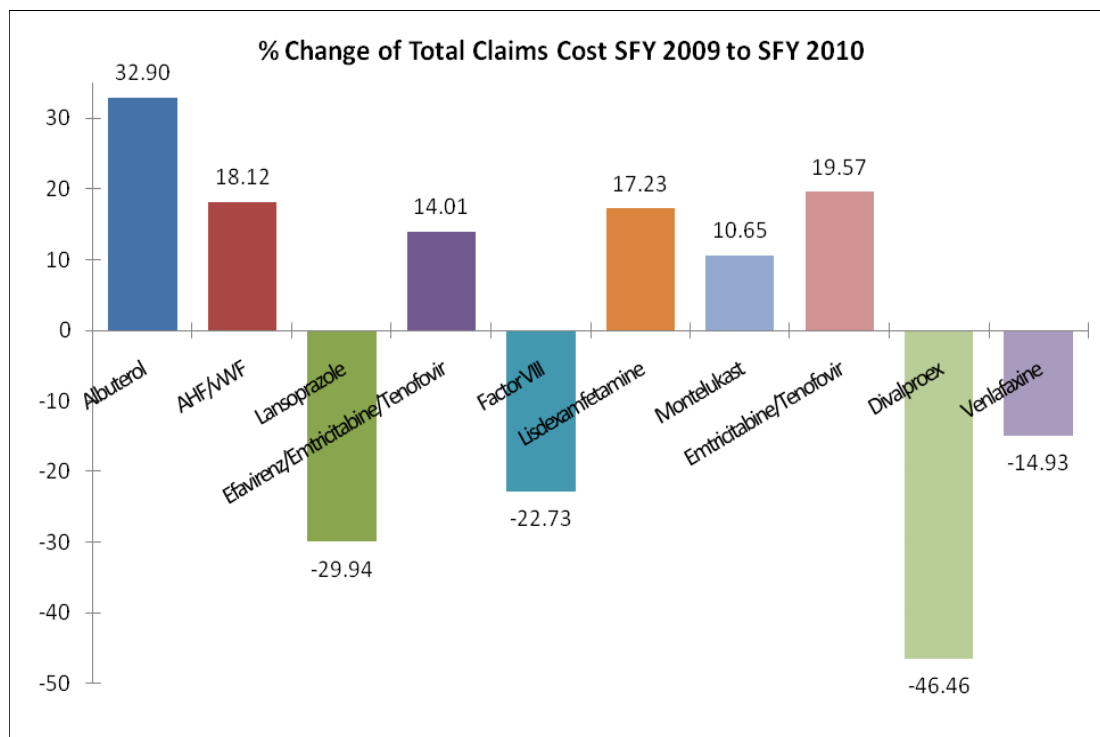


Figure 5.2: Significant Percent Changes of Total Claims Cost from SFY 2009 to SFY 2010



Drug Level Reporting

Specific drug level is reported using the top 25 drugs based on number of claims and the top 25 drugs based on total claims cost. This level is more specific than the generic ingredient level since it reports on one agent. For example, Risperdal® and Risperdal Consta® are reported as risperidone at the generic ingredient level, whereas here they are reported separately; Prevacid® and lansoprazole are reported under lansoprazole at the generic ingredient level and separately at the drug level.

Again, it is important to review this level both by number of claims and total claims cost to see the drugs that are most costly as well as those drugs that are most commonly-prescribed. Several agents would be lost if these were reported using only one method. For example, several benzodiazepines appear on the top 25 drugs based on number of claims and, while these drugs are frequently prescribed, they represent a smaller cost to KHPA Medical Programs compared to other agents.

The top 25 drugs by total number of claims did not change significantly from SFY 2009 to SFY 2010. Seroquel® had the most significant decrease in total claims from SFY 2009 to SFY 2010. This decrease may be due to the shift from Seroquel to Seroquel XR®, which became available in SFY 2010. At this level of reporting these agents are reported separately, whereas at the generic ingredient level they are reported together under quetiapine. In SFY 2009 there were 30,533 claims for Seroquel compared to 25,107 claims in SFY 2010. There were 8,003 claims for Seroquel XR in SFY 2010.

Table 6.1 contains the top 25 drugs based on number of claims. **Figure 6.1** shows the most significant percentage changes for total claims from SFY 2009 to SFY 2010.

The top 25 drugs by total claims cost remained nearly unchanged from SFY 2009, with antipsychotics, hemostatics, and antiretrovirals making up a majority of the list. OxyContin® had the highest percent increase in total claims cost with over \$2.5 million in expenditures in SFY 2010 compared to just under \$2 million in SFY 2009.

Table 6.2 contains the top 25 drugs based on total claims cost. **Figure 6.2** shows the most significant percentage changes for total claims cost from SFY 2009 to SFY 2010.

Drug Level Reporting

Table 6.1: Top 25 Drugs By Total Claims

Drug Name	AHFS Therapeutic Class	Total Claims	Total Users	Total Claims Cost	Avg Cost/Claim	% Total Claims
Hydrocodone/APAP	Opiate Agonists	66,056	16,331	\$692,917	\$10.49	3.16%
Clonazepam	Benzodiazepines (Anticonvulsants)	45,759	6,407	\$238,541	\$5.21	2.19%
Loratadine	2 nd Generation Antihistamines	43,365	9,229	\$208,836	\$4.82	2.07%
Alprazolam	Benzodiazepines (Anxiolytic, Sed/Hyp)	41,937	6,904	\$199,627	\$4.76	2.00%
Lorazepam	Benzodiazepines (Anxiolytic, Sed/Hyp)	33,534	6,791	\$205,498	\$6.13	1.60%
Risperidone	Antipsychotic Agents	27,408	4,118	\$1,105,661	\$40.34	1.31%
Lisinopril	ACE Inhibitors	26,196	4,634	\$96,384	\$3.68	1.25%
Abilify	Antipsychotic Agents	26,079	4,419	\$12,783,310	\$490.18	1.25%
Seroquel	Antipsychotic Agents	25,107	3,808	\$7,942,634	\$316.35	1.20%
Singulair	Leukotriene Modifiers	25,074	6,241	\$2,724,993	\$108.68	1.20%
Levothyroxine	Thyroid Agents	25,050	3,521	\$135,392	\$5.40	1.20%
Amoxicillin	Penicillins	24,177	18,417	\$147,978	\$6.12	1.15%
Sertraline	Antidepressants	23,209	4,291	\$155,482	\$6.70	1.11%
Azithromycin	Macrolides	23,050	16,694	\$378,615	\$16.43	1.10%
Trazodone	Antidepressants	22,652	4,778	\$136,785	\$6.04	1.08%
ProAir HFA	Beta-Adrenergic Agonists	21,768	8,807	\$837,343	\$38.47	1.04%
Clonidine	Central Alpha-Agonists	21,654	3,615	\$144,511	\$6.67	1.03%
Simvastatin	HMG-CoA Reductase Inhibitors	20,409	3,488	\$82,720	\$4.05	0.97%
Lexapro	Antidepressants	19,739	3,676	\$1,871,169	\$94.80	0.94%
Metformin	Biguanides	19,524	3,393	\$84,193	\$4.31	0.93%
Cetirizine	2 nd Generation Antihistamines	19,332	6,052	\$161,053	\$8.33	0.92%
Furosemide	Loop Diuretics	19,110	3,457	\$81,012	\$4.24	0.91%
Vyvanse	Amphetamines	18,946	3,330	\$2,221,604	\$117.26	0.91%
Lansoprazole	Proton-Pump Inhibitors	17,669	4,003	\$1,416,397	\$80.16	0.84%
Prevacid	Proton-Pump Inhibitors	17,489	4,801	\$2,745,814	\$157.00	0.84%
Totals		674,293	161,205	\$36,798,470	\$54.57	32.21%

Drug Level Reporting

Table 6.2: Top 25 Drugs By Total Claims Cost

Drug Name	AHFS Therapeutic Class	Total Claims	Total Users	Total Claims Cost	Avg Cost/Claim	% Total Claims Cost
Abilify	Antipsychotic Agents	26,079	4,419	\$12,783,310	\$490.18	7.90%
Seroquel	Antipsychotic Agents	25,107	3,808	\$7,942,634	\$316.35	4.91%
Alphanate	Hemostatics	171	7	\$5,734,130	\$33,532.92	3.54%
Zyprexa	Antipsychotic Agents	8,057	1,175	\$4,541,901	\$563.72	2.81%
Geodon	Antipsychotic Agents	12,477	1,823	\$4,349,588	\$348.61	2.69%
Atripla	Antiretrovirals	2,345	338	\$2,984,825	\$1,272.85	1.84%
Prevacid	Proton-Pump Inhibitors	17,489	4,801	\$2,745,814	\$157.00	1.70%
Singulair	Leukotriene Modifiers	25,074	6,241	\$2,724,993	\$108.68	1.68%
Invega	Antipsychotic Agents	6,327	998	\$2,618,916	\$413.93	1.62%
Seroquel XR	Antipsychotic Agents	8,003	1,538	\$2,566,259	\$320.66	1.59%
Oxycontin	Opiate Agonists	6,630	1,032	\$2,553,157	\$385.09	1.58%
Concerta	Anorex, Resp and Cereb Stim, Misc	17,364	2,873	\$2,364,608	\$136.18	1.46%
Risperdal Consta	Antipsychotic Agents	3,394	377	\$2,265,076	\$667.38	1.40%
Advair Diskus	Beta-Adrenergic Agonists	11,064	3,083	\$2,228,504	\$201.42	1.38%
Vyvanse	Amphetamines	18,946	3,330	\$2,221,604	\$117.26	1.37%
Truvada	Antiretrovirals	2,550	366	\$2,150,818	\$843.46	1.33%
Cymbalta	Antidepressants	11,513	1,897	\$1,958,537	\$170.12	1.21%
Lexapro	Antidepressants	19,739	3,676	\$1,871,169	\$94.80	1.16%
Strattera	CNS Agents, Misc	11,675	1,897	\$1,786,224	\$153.00	1.10%
Lipitor	HMG-CoA Reductase Inhibitors	14,237	1,939	\$1,611,775	\$113.21	1.00%
Advate	Hemostatics	27	4	\$1,554,169	\$57,561.80	0.96%
Amphetamine Mixed Salts	Amphetamines	9,352	1,925	\$1,417,125	\$151.53	0.88%
Lansoprazole	Proton-Pump Inhibitors	17,669	4,003	\$1,416,397	\$80.16	0.88%
Lantus	Insulins	9,487	1,655	\$1,378,569	\$145.31	0.85%
Effexor XR	Antidepressants	6,572	1,017	\$1,185,866	\$180.44	0.73%
Totals		291,348	54,222	\$76,955,970	\$264.14	47.56%

Drug Level Reporting

Figure 6.1: Significant Percent Changes of Total Claims from SFY 2009 to SFY 2010

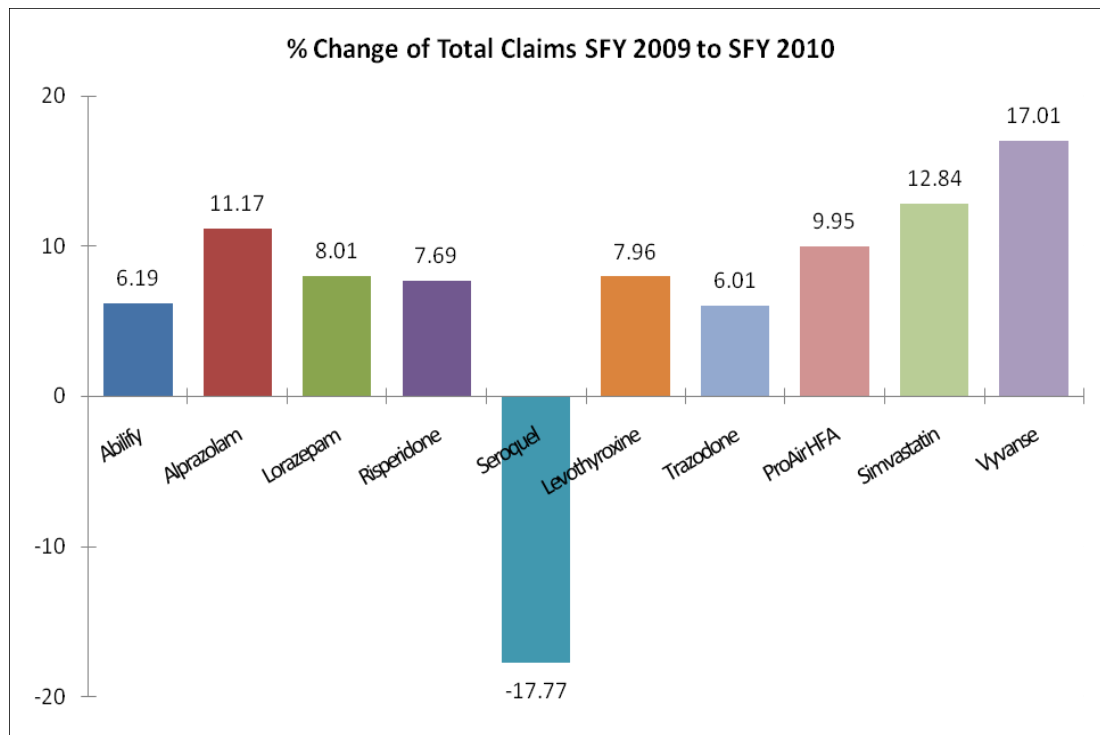
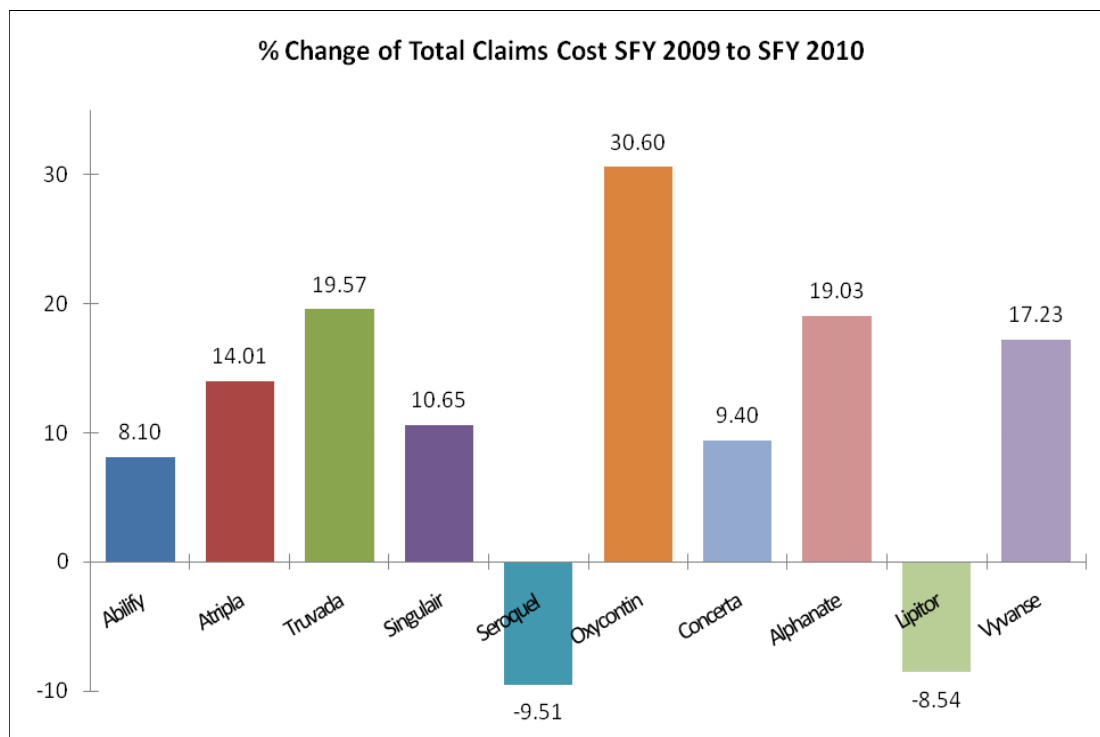


Figure 6.2: Significant Percent Changes of Total Claims Cost from SFY 2009 to SFY 2010



Conclusion

In SFY 2010, there was a growth in the number of members covered by KHPA Medical Programs, and a decrease in total expenditures. KHPA Medical Programs paid nearly \$162 million in SFY 2010 compared to over \$175 million in SFY 2009—a decrease of over \$13 million in prescription expenditures.

Table 7.1 shows the total prescription cost, number of prescription claims, and average members per month for the past seven years.

Between SFY 2006 and SFY 2007, there was a dramatic decrease in prescription costs and prescription claims. This decrease was primarily attributed to the shift of members into Medicare Part D.

Several of the top therapeutic classes have continued to be top expenditures for KHPA Medical Programs over the past several years. These include antipsychotic agents, antidepressants, anticonvulsants, hemostatics, antiretrovirals, opiate agonists, and proton-pump inhibitors. Hemostatics and antiretrovirals represent a small number of claims, but the cost of these medications can be tremendous, with a single claim costing over \$100,000.

Anticonvulsants have traditionally represented a large expenditure for KHPA Medical Programs. In SFY 2010 KHPA Medical Programs spent just over \$6 million on this therapeutic class, a decrease of over \$8 million from SFY 2009. The main reason for this decrease was the availability of generic drugs within this therapeutic class during SFY 2010.

Lansoprazole (Prevacid®) has remained in the list of top drugs both by total claims cost and total number of claims over the past several years. This is most likely due to it having been a preferred proton pump inhibitor since the inception of the PDL in 2002. In November 2009 Prevacid became generically available, resulting in a cost savings of over \$1.6 million in the proton-pump inhibitor therapeutic class.

The majority of the agents that appear on both the top drugs by claims cost and total claims lists are used to treat mental health conditions. This has been a trend for the past several years. KHPA Medical Programs are not able to directly manage these agents due to Kansas law (Kansas Statute 39-7, 121b).

Table 7.1: Past Years' Totals

Period Covered	Prescription Claims Cost	Prescription Claims	Average Members Per Month
SFY2010	\$161,809,369	2,093,279	147,886
SFY2009	\$175,085,301	2,037,193	142,493
SFY2008	\$158,877,070	1,938,007	137,733
SFY2007*	\$153,419,466	2,395,348	294,590
SFY2006*	\$251,543,689	4,372,001	297,729
SFY2005*	\$280,443,262	4,562,932	300,435
SFY2004*	\$265,258,972	4,580,713	270,777

*Annual Reports were prepared using data from the Managed Care Options.

Appendix A

Adrenals

Beclomethasone
Betamethasone
Budesonide
Budesonide/Formoterol
Ciclesonide
Cortisone
Dexamethasone
Fludrocortisone
Flunisolide
Fluticasone
Hydrocortisone
Methylprednisolone
Mometasone
Prednisolone
Prednisone
Triamcinolone

Amphetamines

Amphetamine Mixed Salts
Dextroamphetamine
Lisdexamfetamine

Angiotensin II Receptor Antagonists

Candesartan
Candesartan/Hydrochlorothiazide
Irbesartan
Irbesartan/Hydrochlorothiazide
Losartan
Losartan/Hydrochlorothiazide
Olmesartan
Olmesartan/Hydrochlorothiazide
Telmisartan
Telmisartan/Amlodipine
Telmisartan/Hydrochlorothiazide
Valsartan
Valsartan/Hydrochlorothiazide

Angiotensin-Converting Enzyme

Inhibitors

Benazepril
Benazepril/Hydrochlorothiazide
Captopril
Enalapril
Enalapril/Hydrochlorothiazide
Fosinopril
Fosinopril/Hydrochlorothiazide
Lisinopril
Lisinopril/Hydrochlorothiazide
Quinapril
Quinapril/Hydrochlorothiazide
Ramipril
Trandolapril
Trandolapril/Verapamil

Anorexicogenic, Respiratory and Cerebral Stimulants, Misc

Armodafinil
Caffeine
Dexmethylphenidate
Methylphenidate
Modafinil
Phentermine
Sibutramine

Anticoagulants

Dalteparin
Enoxaparin
Fondaparinux
Heparin
Warfarin

Anticonvulsants, Misc

Carbamazepine
Divalproex
Felbamate
Gabapentin
Lacosamide
Lamotrigine
Levetiracetam
Magnesium Sulfate
Oxcarbazepine
Pregabalin
Rufinamide
Tiagabine
Topiramate
Valproic Acid
Vigabatrin
Zonisamide

Antidepressants

Amitriptyline
Amitriptyline/Chlordiazepoxide
Amitriptyline/Perphenazine
Amoxapine
Bupropion
Citalopram
Clomipramine
Desipramine
Desvenlafaxine
Doxepin
Duloxetine
Escitalopram
Fluoxetine
Fluoxetine/Olanzapine
Fluvoxamine
Imipramine
Maprotiline
Mirtazapine

Antidepressants (cont.)

Nefazodone
Nortriptyline
Paroxetine
Phenelzine
Protriptyline
Sertraline
Trazodone
Venlafaxine

Antineoplastic Agents

Altretamine
Anastrozole
Bicalutamide
Capecitabine
Chlorambucil
Cyclophosphamide
Cytarabine
Dasatinib
Erlotinib
Etoposide
Everolimus
Exemestane
Fluorouracil
Flutamide
Hydroxyurea
Imatinib
Lapatinib
Letrozole
Leuprolide
Lomustine
Megestrol
Mercaptopurine
Methotrexate
Nilotinib
Procarbazine
Sorafenib
Sunitinib
Tamoxifen
Temozolomide
Thioguanine
Topotecan
Tretinoin
Vorinostat

Antipsychotic Agents

Aripiprazole
Asenapine
Chlorpromazine
Clozapine
Fluphenazine
Haloperidol
Iloperidone

Appendix A

Antipsychotic Agents (cont.)

Loxapine
Molindone
Olanzapine
Paliperidone
Perphenazine
Pimozide
Quetiapine
Risperidone
Thioridazine
Thiothixene
Trifluoperazine
Ziprasidone

Antiretrovirals

Abacavir
Abacavir/Lamivudine
Abacavir/Lamivudine/Zidovudine
Atazanavir
Darunavir
Delavirdine
Didanosine
Efavirenz
Efavirenz/Tenofovir/Emtricitabine
Emtricitabine
Emtricitabine/Tenofovir
Enfuvirtide
Etravirine
Fosamprenavir
Indinavir
Lamivudine
Lamivudine/Zidovudine
Lopinavir/Ritonavir
Maraviroc
Nelfinavir
Nevirapine
Raltegravir
Ritonavir
Saquinavir
Stavudine
Tenofovir
Tipranavir
Zidovudine

Anxiolytics, Sedative & Hypnotics,

Misc

Buspirone
Chloral Hydrate
Eszopiclone
Hydroxyzine
Meprobamate
Ramelteon
Zaleplon

Anxiolytics, Sedative & Hypnotics,

Misc (cont.)

Zolpidem

Benzodiazepines (Anticonvulsants)

Clonazepam

Benzodiazepines (Anxiolytic,

Sedatives & Hypnotics)

Alprazolam
Clorazepate
Diazepam
Lorazepam
Midazolam
Temazepam

Beta-Adrenergic Agonists

Albuterol
Albuterol/Ipratropium
Arformoterol
Formoterol
Levalbuterol
Metaproterenol
Pirbuterol
Salmeterol
Salmeterol/Fluticasone
Terbutaline

Beta-Adrenergic Blocking Agents

Acebutolol
Atenolol
Atenolol/Chlorthalidone
Betaxolol
Bisoprolol
Bisoprolol/Hydrochlorothiazide
Carvedilol
Labetalol
Metoprolol
Metoprolol/Hydrochlorothiazide
Nadolol
Nebivolol
Pindolol
Propranolol
Propranolol/Hydrochlorothiazide
Sotalol

Biguanides

Metformin

Biologic Response Modifiers

Glatiramer
Interferon Beta-1A
Interferon Beta-1B
Lenalidomide
Thalidomide

Central Alpha Agonists

Clonidine

Central Alpha Agonists (cont.)

Guanfacine
Methyldopa

Central Nervous System Agents,

Misc

Acamprosate
Atomoxetine
Carbidopa
Guanfacine
Memantine
Riluzole

Centrally Acting Skeletal Muscle

Relaxants

Carisoprodol
Carisoprodol/Aspirin
Carisoprodol/Aspirin/Codeine
Chlorzoxazone
Cyclobenzaprine
Metaxalone
Methocarbamol
Tizanidine

Enzymes

Alglucosidase Alfa
Dornase Alfa
Idursulfase
Sacrosidase

Hemostatics

AHF
AHF, Plasma/Albumin-Free
AHF/vWF
Aminocaproic Acid
Anti-Inhibitor Coagulant Complex
Coagulation Factor VIIa

HMG-CoA Reductase Inhibitors

Atorvastatin
Atorvastatin/Amlodipine
Fluvastatin
Lovastatin
Lovastatin/Niacin
Pravastatin
Rosuvastatin
Simvastatin
Simvastatin/Niacin

Insulins

Insulin
Insulin Aspart
Insulin Detemir
Insulin Glargine
Insulin Glulisine
Insulin Lispro
Insulin Susp Isophane

Appendix A

Insulins (cont.)

Insulin/Insulin Susp Isophane

Leukotriene Modifiers

Montelukast

Zafirlukast

Zileuton

Macrolides

Azithromycin

Clarithromycin

Erythromycin

Telithromycin

Monoclonal Antibodies

Palivizumab

Non-Steroidal Anti-Inflammatory Agents

Aspirin

Aspirin/Acetaminophen/Caffeine

Aspirin/Butalbital/Caffeine

Celecoxib

Choline Magnesium Trisalicylate

Diclofenac

Diclofenac/Misoprostol

Diflunisal

Etodolac

Flurbiprofen

Ibuprofen

Indomethacin

Ketoprofen

Ketorolac

Meclofenamate

Mefenamic Acid

Meloxicam

Nabumetone

Naproxen

Oxaprozin

Piroxicam

Salsalate

Sulindac

Tolmetin

Opiate Agonists

Codeine

Codeine/Acetaminophen

Codeine/Butalbital/Caffeine/

Acetaminophen

Fentanyl

Hydrocodone/Acetaminophen

Hydrocodone/Ibuprofen

Hydromorphone

Levorphanol

Meperidine

Methadone

Opiate Agonists (cont.)

Morphine

Morphine/Naltrexone

Opium/Belladonna

Oxycodone

Oxycodone/Acetaminophen

Oxycodone/Aspirin

Oxycodone/Ibuprofen

Oxymorphone

Propoxyphene

Propoxyphene/Acetaminophen

Tapentadol

Tramadol

Penicillins

Amoxicillin

Amoxicillin/Clavulanate

Ampicillin

Ampicillin/Sulbactam

Dicloxacin

Nafcillin

Oxacillin

Penicillin

Piperacillin/Tazobactam

Pituitary

Desmopressin

Somatropin

Platelet-Aggregation Inhibitors

Cilostazol

Clopidogrel

Prasugrel

Ticlopidine

Proton-Pump Inhibitors

Dexlansoprazole

Esomeprazole

Lansoprazole

Lansoprazole/Amoxicillin/

Clarithromycin

Omeprazole

Omeprazole/Sodium Bicarbonate

Pantoprazole

Rabeprazole

Thiazolidinediones

Pioglitazone

Pioglitazone/Glimepiride

Pioglitazone/Metformin

Rosiglitazone

Rosiglitazone/Glimepiride

Rosiglitazone/Metformin

Thyroid Agents

Levothyroxine

Liothyronine

Thyroid Agents (cont.)

Thyroid

2nd Generation Antihistamines

Cetirizine

Cetirizine/Pseudoephedrine

Desloratadine

Desloratadine/Pseudoephedrine

Fexofenadine

Fexofenadine/Pseudoephedrine

Levocetirizine

Loratadine

Loratadine/Pseudoephedrine